| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF NEW YORK | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Joseph First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Dahari Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1174 | |

| Del | btor 1 Joseph Dahari | | Case number (if known) | | |
|-----|---|---|--|--|--|
| | | | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | 34 Opal Lane | If Debtor 2 lives at a different address: | | |
| | | Staten Island, NY 10309 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Richmond | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |
| | | | | | |

| Deb | otor 1 Joseph Dahari | | | | | Case number (if known) | | | |
|---|--|---|--------------------------|--|---------------------------|---|-------------|--|--|
| | | | | | | | | | |
| Par | t 2: Tell the Court About Y | our Bankr | uptcy Ca | ase | | | | | |
| 7. The chapter of the Bankruptcy Code you are | | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | |
| | choosing to file under | ■ Chapte | er 7 | | | | | | |
| | | ☐ Chapte | er 11 | | | | | | |
| | | ☐ Chapte | □ Chapter 12 | | | | | | |
| | | ☐ Chapte | er 13 | | | | | | |
| 8. | How you will pay the fee | ■ Iwi | II nav the | e entire fee when I file | my natition Places cha | eck with the clerk's office in your local court for mo | re details | | |
| 0. | now you will pay the ree | abo orde | ut how yo er. If your | ou may pay. Typically, if | you are paying the fee | yourself, you may pay with cash, cashier's check, on half, your attorney may pay with a credit card or ch | or money | | |
| | | ☐ Ine | ed to pa | | ts. If you choose this op | tion, sign and attach the Application for Individuals | to Pay | | |
| | | | • | , | , | on only if you are filing for Chapter 7. By law, a jud | lge may, | | |
| | | but | is not rec | juired to, waive your fee | , and may do so only if y | rour income is less than 150% of the official povert in installments). If you choose this option, you mu | y line that | | |
| | | | | | | ficial Form 103B) and file it with your petition. | st iiii out | | |
| | | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 10. | Are any bankruptcy | ■ No | | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your | ■ No. | Go to | line 12. | | | | | |
| | residence? | ☐ Yes. | Has yo | our landlord obtained an | eviction judgment agair | nst you? | | | |
| | | | | No. Go to line 12. | | | | | |
| | | | | Yes. Fill out <i>Initial Stat</i> this bankruptcy petition | | n Judgment Against You (Form 101A) and file it as | part of | | |
| | | | | | | | | | |

| Deb | otor 1 | Joseph Dahari | | | Case number (if known) | | |
|-----|---|--|------------------------|---|--|--|--|
| | | | | | | | |
| Par | t 3: | Report About Any Bu | sinesses | You Own as a Sole Propri | etor | | |
| 12. | of an | ou a sole proprietor y full- or part-time ness? | ■ No. | Go to Part 4. | | | |
| | | | ☐ Yes. | Name and location of bo | usiness | | |
| | busin an in sepa as a | e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. | | Name of business, if an | y | | |
| | If you | have more than one proprietorship, use a rate sheet and attach | | Number, Street, City, St | ate & ZIP Code | | |
| | | nis petition. | | | pox to describe your business: | | |
| | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | | | |
| | | | | _ | al Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | | defined in 11 U.S.C. § 101(53A)) | | |
| | | | | · · · · · · · · · · · · · · · · · · · | ker (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | ☐ None of the abo | ve | | |
| 13. | Chap Bank | ou filing under ster 11 of the ruptcy Code and are a small business | deadlines operation | s. If you indicate that you are | e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of I federal income tax return or if any of these documents do not exist, follow the procedure | | |
| | | definition of small | ■ No. | I am not filing under Cha | apter 11. | | |
| | | ess debtor, see 11 C. § 101(51D). | □ No. | I am filing under Chapte Code. | r Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | | ☐ Yes. | I am filing under Chapte | er 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: | Report if You Own or | Have Any | Hazardous Property or A | ny Property That Needs Immediate Attention | | |
| 14. | prop alleg | ou own or have any erty that poses or is ed to pose a threat | ■ No. | | | | |
| | ident publi Or de | minent and ifiable hazard to c health or safety? o you own any | | What is the hazard? | | | |
| | | erty that needs ediate attention? | | If immediate attention is needed, why is it needed? | | | |
| | peris livest or a l | xample, do you own hable goods, or ock that must be fed, building that needs nt repairs? | | Where is the property? | | | |
| | | | | | Number, Street, City, State & Zip Code | | |
| | | | | | | | |

Doc 1 Filed 12/19/19 Entered 12/19/19 09:58:24 Case 1-19-47610-cec Debtor 1 Joseph Dahari Case number (if known) Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a ☐ I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. □ I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate filed this bankruptcy petition, but I do not have choices. If you cannot do so, you are not eligible to a certificate of completion. of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your from an approved agency, but was unable to obtain services from an approved agency, but was creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you filed for bankruptcy. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. ☐ Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational

decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so. Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 5:

making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

| Deb | otor 1 Joseph Dahari | | | Case number | (if known) | | | | |
|-----|---|--|--|---|--|--|--|--|--|
| Par | t 6: Answer These Quest | ions for Repo | orting Purposes | | | | | | |
| 16. | What kind of debts do you have? | | | umer debts? Consumer debts are define I, family, or household purpose." | ed in 11 U.S.C. § 101(8) as "incurred by an | | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | | Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | No. Go to line 16c. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | 16c. St | tate the type of debts you owe t | that are not consumer debts or business | debts | | | | |
| 17. | Are you filing under Chapter 7? | □ No. I a | am not filing under Chapter 7. 0 | Go to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | | I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors? | | | | | | |
| | administrative expenses are paid that funds will | | No | | | | | | |
| | be available for distribution to unsecured creditors? | | l Yes | | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | □ 25,001-50,000 | | | | |
| | you estimate that you owe? | 50-99 | | □ 5001-10,000 □ 10,004,05,000 | □ 50,001-100,000 | | | | |
| | | ☐ 100-199 ☐ 200-999 | | □ 10,001-25,000 | ☐ More than100,000 | | | | |
| 19. | How much do you | □ \$0 - \$50, | 000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | | |
| | estimate your assets to be worth? | \$50,001 | | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | | |
| | | □ \$100,001 - \$500,000 ■ \$500,001 - \$1 million | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | | |
| | | | | | | | | | |
| 20. | How much do you estimate your liabilities | □ \$0 - \$50, □ \$50,001 | | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion | | | | |
| | to be? | □ \$50,001 □ \$100,001 | | □ \$50,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | | |
| | | \$ 500,001 | - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | | |
| Par | t7: Sign Below | | | | | | | | |
| For | you | I have exam | ined this petition, and I declare | under penalty of perjury that the information | ation provided is true and correct. | | | | |
| | | | | m aware that I may proceed, if eligible, u available under each chapter, and I cho | | | | | |
| | | | | pay or agree to pay someone who is not a patice required by 11 U.S.C. § 342(b). | an attorney to help me fill out this | | | | |
| | | I request rel | ief in accordance with the chap | ter of title 11, United States Code, specif | fied in this petition. | | | | |
| | I understand making a false statement, concealing property, or obtaining money or property by fraud in contabankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. § and 3571. | | | | | | | | |
| | | /s/ Joseph Joseph Da | | Signature of Debtor 2 | 2 | | | | |
| | | Signature of | | - | | | | | |
| | | Executed or | | Executed on | | | | | |
| | | | MM / DD / YYYY | MM / | DD / YYYY | | | | |

| Debtor 1 Joseph Dahari | | Cas | se number (if known) |
|---|---|---|---|
| For your attorney, if you are represented by one | under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify t | ed States Code, and have e hat I have delivered to the | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| If you are not represented by an attorney, you do not need to file this page. | and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect. | , certify that I have no knov | vledge after an inquiry that the information in the |
| | /s/ Jay Meyers | Date | December 19, 2019 |
| | Signature of Attorney for Debtor | | MM / DD / YYYY |
| | Jay Meyers Printed name | | |
| | Jay Meyers, Esq. | | |
| | Firm name | | |
| | 1688 Victory Boulevard Ste. 201 | | |
| | Staten Island, NY 10314 | | |
| | Number, Street, City, State & ZIP Code | | |
| | Contact phone 718 273-2525 | Email address | jay.mblaw@gmail.com |
| | jm5995 NY | | |
| | Bar number & State | | |

| Fill | ill in this information to identify your case: | | | |
|------------|---|-------------------|--------------------|-----------------------------|
| Deb | ebtor 1 Joseph Dahari | | | |
| Deb | First Name Middle Name Last Name ebtor 2 | | | |
| | pouse if, filing) First Name Middle Name Last Name | | | |
| Uni | nited States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK | | | |
| | ase numberknown) | [| | if this is an |
| | | | ameno | led filing |
| Su Be a | official Form 106Sum ummary of Your Assets and Liabilities and Certain Statistical Info | responsible for | supplyin | |
| you | ormation. Fill out all of your schedules first; then complete the information on this form. If you are ur original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | filing amended | l schedul | es after you file |
| Par | art 1: Summarize Your Assets | | | |
| | | | Your as Value o | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | | \$ | 600,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | | \$ | 5,550.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | | \$ | 605,550.00 |
| Par | art 2: Summarize Your Liabilities | | | |
| | | | Your lia | ibilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of S | Schedule D | \$ | 550,000.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | | \$ | 9,680.15 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | | \$ | 5,820.00 |
| | Your to | otal liabilities | 8 | 565,500.15 |
| Par | art 3: Summarize Your Income and Expenses | | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | | \$ | 2,966.50 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | | \$ | 3,850.00 |
| Par | art 4: Answer These Questions for Administrative and Statistical Records | | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the | e court with your | other sch | edules. |
| 7. | ■ Yes What kind of debt do you have? | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 15 | | personal, | family, or |
| | Your debts are not primarily consumer debts. You have nothing to report on this part of the fo the court with your other schedules. | orm. Check this b | ox and su | abmit this form to |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

| Debtor 1 | Joseph Dahari | Case number (if known) | |
|----------|---------------|------------------------|--|
| | | | |

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,466.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on <i>Schedule E/F</i> , copy the following: | Total | claim |
|--|-------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 9,680.15 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 9,680.15 |

| D . I. | | | your case and th | nis filing | g: | | | |
|-----------------|---|------------------------------------|---|-------------------------|--|--|---|--|
| Deb | | Joseph Dah | | Name | Last Name | | | |
| | tor 2 use, if filling) F | First Name | Middle | Name | Last Name | | | |
| | ed States Bankru | | | | CT OF NEW YORK | | | |
| _ | | . , | | | | | | _ |
| Cas | e number | | | | | | | Check if this is an amended filing |
| ∩ff | icial Form | 106A/P | 1 | | | | | |
| | hedule | | - | | | | | 12/15 |
| think infori | it fits best. Be as nation. If more spa er every question | complete and a ace is needed, a | accurate as possibl attach a separate sh | e. If two heet to th | only once. If an asset fits in more than or married people are filing together, both ar his form. On the top of any additional page Estate You Own or Have an Interest In | e equally respo | onsible for su | pplying correct |
| | you own or have No. Go to Part 2. Yes. Where is the | | uitable interest in a | ny resid | lence, building, land, or similar property? | | | |
| • | Too. Whole is the | property: | | | | | | |
| 1.1 | Too. Whole is the | property: | | What | t is the property? Check all that apply | | | |
| 1.1 | 34 Opal Lane Street address, if ava | | cription | What | t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | the amount | of any secured | ims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> . |
| 1.1 | 34 Opal Lane Street address, if ava | iilable, or other des | 10309-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | the amount Creditors W Current val entire prop | of any secured tho Have Clain ue of the erty? | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? |
| 1.1 | 34 Opal Lane Street address, if ava | illable, or other des | | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount Creditors W Current val entire prop \$60 Describe th | of any secured the Have Clain ue of the erty? 0,000.00 | d claims on Schedule D: ns Secured by Property. Current value of the |
| 1.1 | 34 Opal Lane Street address, if ava Staten Island City | iilable, or other des | 10309-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current val entire prop \$60 Describe th (such as fe | of any secured the Have Claim ue of the erty? 0,000.00 ne nature of you e simple, tenae), if known. | current value of the portion you own? \$600,000.00 Schedule D: Current value of the portion you own? |
| 1.1 | 34 Opal Lane Street address, if ava | iilable, or other des | 10309-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current val entire prop \$60 Describe th (such as fe a life estate Fee simp | of any secured the Have Claim ue of the erty? 0,000.00 ne nature of yee simple, tense), if known. | current value of the portion you own? \$600,000.00 Sclaims on Schedule D: ns Secured by Property. |
| 1.1 | 34 Opal Lane Street address, if ava Staten Island City Richmond | iilable, or other des | 10309-0000 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current val entire prop \$60 Describe th (such as fe a life estate Fee simp | of any secured the Have Claim ue of the erty? 0,000.00 the nature of yellow if known. Dile if this is communications) | current value of the portion you own? \$600,000.00 Sour ownership interest ancy by the entireties, or |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debtor 1 | Joseph Dahari | | Case number (if known) | |
|---|---|--|--|--|
| 3. Cars, van | s, trucks, tractors, sport utility ve | hicles, motorcycles | | |
| | • | • | | |
| □ No | | | | |
| Yes | | | | |
| | Ford | | Do not deduct secured c | laims or exemptions. Put |
| 3.1 Make: | | Who has an interest in the property? Check one | the amount of any secure | ed claims on Schedule D: |
| Model | | Debtor 1 only | Creditors Who Have Cla | ims Secured by Property. |
| Year: | 2003 ximate mileage: 210,000 | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | information: | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire property: | portion you own? |
| | | A reast one of the debtors and another | | |
| | | ☐ Check if this is community property (see instructions) | \$1,500.00 | \$1,500.00 |
| .pages yo Part 3: Desc Do you own 6. Househol | ou have attached for Part 2. Write | terest in any of the following items? | | \$1,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | Describe Furnishings an | | | \$2,500.00 |
| | <u> </u> | | | |
| □ No | | | ters, scanners; music collecti | ons; electronic devices \$1,000.00 |
| | | • | I | · · · |
| ■ No | | prints, or other artwork; books, pictures, or other a llectibles | art objects; stamp, coin, or ba | seball card collections; |
| Examples No | nt for sports and hobbies s: Sports, photographic, exercise, ar musical instruments | nd other hobby equipment; bicycles, pool tables, g | olf clubs, skis; canoes and ka | ayaks; carpentry tools; |
| | | | | |
| 10. Firearms Example ■ No | s es: Pistols, rifles, shotguns, ammuni | tion, and related equipment | | |

| Debtor 1 | Joseph Dahari | | Case number (if know | n) |
|----------------------------|--|---------------------------|--|---|
| ☐ Yes. | . Describe | | | |
| 11. Clothe | es | | | |
| <i>Exam</i> □ No | nples: Everyday clothes, | furs, leather coats, desi | igner wear, shoes, accessories | |
| | . Describe | | | |
| | | | | \$250.00 |
| | Clot | hing | | \$250.00 |
| 12. Jewel i | rv | | | |
| _Exam | | costume jewelry, engag | gement rings, wedding rings, heirloom jewelry, watches, gems | , gold, silver |
| □ No ■ Yes | . Describe | | | |
| . 55. | | | | *** |
| | Wris | stwatch | | \$50.00 |
| 13 Non-fa | arm animals | | | |
| Exam | nples: Dogs, cats, birds, h | norses | | |
| ■ No | . Describe | | | |
| | | | | |
| 14. Any o t ■ No | ther personal and hous | sehold items you did r | not already list, including any health aids you did not list | |
| | . Give specific information | on | | |
| | · | | | |
| | | | art 3, including any entries for pages you have attached | \$3,800.00 |
| for P | art 3. Write that number | r here | | |
| Dort 4: Do | accuiba Varus Financial Acc | | | |
| | escribe Your Financial Ass wn or have any legal o | | any of the following? | Current value of the |
| | | | | <pre>portion you own? Do not deduct secured</pre> |
| | | | | claims or exemptions. |
| 16. Cash | | | | |
| Exam □ No | nples: Money you have in | your wallet, in your ho | me, in a safe deposit box, and on hand when you file your per | ition |
| ■ Voc | | | | |
| | | | Cash | \$50.00 |
| | | | Casii | |
| 17. Depos | sits of money | | | |
| Exam | | | unts; certificates of deposit; shares in credit unions, brokerag with the same institution, list each. | e houses, and other similar |
| □ No | mondadiono. Il you | iavo maiapio accounto | , | |
| Yes. | | | Institution name: | |
| | 17 | 1. Checking | Checking account at Capital One Bank | \$200.00 |
| | 17. | - Checking | - Chooking account at Capital One Bank | |
| 18. Bonds | s, mutual funds, or pub | licly traded stocks | | |
| | pples: Bond funds, invest | ment accounts with bro | kerage firms, money market accounts | |
| ■ No □ Yes | | Institution or issuer r | name: | |
| | | | | and to an III o |
| | oublicly traded stock an venture | a interests in incorpo | prated and unincorporated businesses, including an inter | est in an LLC, partnership, and |
| ■ No | | | | |
| ☐ Yes. | . Give specific information | on about them | | |
| Official For | 106A/D | | Cahadula A/D. Dranarty | 0 |

Official Form 106A/B

| De | btor 1 Joseph Dahari | Case number (if known) | |
|-----|---|--|---|
| | Name of entity: | % of ownership: | |
| | Government and corporate bonds and other negotial Negotiable instruments include personal checks, cashie Non-negotiable instruments are those you cannot transform No ☐ Yes. Give specific information about them Issuer name: | rs' checks, promissory notes, and money orders. | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(| (b), thrift savings accounts, or other pension or profit-sharing plar | ns |
| | ☐ Yes. List each account separately. Type of account: | Institution name: | |
| 22. | | at you may continue service or use from a company olic utilities (electric, gas, water), telecommunications companies | or others |
| | ■ No □ Yes | Institution name or individual: | |
| 23. | Annuities (A contract for a periodic payment of money to | o you, either for life or for a number of years) | |
| | ■ No □ Yes Issuer name and description. | | |
| | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No | ified ABLE program, or under a qualified state tuition progra | m. |
| | Yes Institution name and description. S | separately file the records of any interests.11 U.S.C. § 521(c): | |
| | Trusts, equitable or future interests in property (othe No □ Yes. Give specific information about them | er than anything listed in line 1), and rights or powers exercis | sable for your benefit |
| | Patents, copyrights, trademarks, trade secrets, and c Examples: Internet domain names, websites, proceeds t ■ No □ Yes. Give specific information about them | | |
| 27. | Licenses, franchises, and other general intangibles | ative association holdings, liquor licenses, professional licenses | |
| | oney or property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you ■ No □ Yes. Give specific information about them, including with | hether you already filed the returns and the tax years | |
| | Family support Examples: Past due or lump sum alimony, spousal supp No ☐ Yes. Give specific information | port, child support, maintenance, divorce settlement, property set | tlement |
| 30. | benefits; unpaid loans you made to someone | s, disability benefits, sick pay, vacation pay, workers' compensate else | ion, Social Security |
| | ■ No □ Yes. Give specific information | | |

| Debtor 1 | Joseph Dahari | Case number (if known) | |
|------------------|---|--|----------------------------|
| Exa | ests in insurance policies mples: Health, disability, or life insurance; health savings account (HS | SA); credit, homeowner's, or renter's insura | nce |
| ■ No | s. Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| If yo | interest in property that is due you from someone who has died u are the beneficiary of a living trust, expect proceeds from a life insu eone has died. | rance policy, or are currently entitled to rec | eive property because |
| | s. Give specific information | | |
| Exa ■ No | ns against third parties, whether or not you have filed a lawsuit omples: Accidents, employment disputes, insurance claims, or rights to s. Describe each claim | | |
| 34. Oth e | r contingent and unliquidated claims of every nature, including o | counterclaims of the debtor and rights to | o set off claims |
| | s. Describe each claim financial assets you did not already list | | |
| ■ No | | | |
| | d the dollar value of all of your entries from Part 4, including any Part 4. Write that number here | | \$250.00 |
| Part 5: | Describe Any Business-Related Property You Own or Have an Interest In. | List any real estate in Part 1. | |
| | u own or have any legal or equitable interest in any business-related prop | perty? | |
| _ | Go to Part 6. Go to line 38. | | |
| | Describe Any Farm- and Commercial Fishing-Related Property You Own of you own or have an interest in farmland, list it in Part 1. | or Have an Interest In. | |
| ` | ou own or have any legal or equitable interest in any farm- or co | mmercial fishing-related property? | |
| _ | es. Go to line 47. | | |
| Part 7: | Describe All Property You Own or Have an Interest in That You Did N | lot List Above | |
| | ou have other property of any kind you did not already list? mples: Season tickets, country club membership | | |
| □ Ye | s. Give specific information | | |
| 54. Ad | d the dollar value of all of your entries from Part 7. Write that nur | nber here | \$0.00 |

| Debto | or 1 Joseph Dahari | | Case number (if known) | |
|--------|--|------------|------------------------------|--------------|
| Part 8 | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$600,000.00 |
| 56. | Part 2: Total vehicles, line 5 | \$1,500.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$3,800.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$250.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$5,550.00 | Copy personal property total | \$5,550.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$605,550.00 |

| | | | | | _ | | | |
|-------------------------------|--|--|---|---|--|---|--|--|
| Fil | II in this inform | nation to identify your case: | | | | | | |
| De | ebtor 1 | Joseph Dahari | | | | | | |
| De | ebtor 2 | First Name | Middle Name | Last Name | | | | |
| | pouse if, filing) | First Name | Middle Name | Last Name | | | | |
| Un | nited States Bar | nkruptcy Court for the: EAS | TERN DISTRICT OF N | EW YORK | | | | |
| Ca | ase number | | | | | | | |
| (if k | known) | | | | | Check if this is an amended filing | | |
| | | | | | | amended ming | | |
| 0 | fficial Fo | rm 106C | | | | | | |
| S | chedule | e C: The Prope | erty You Cla | aim as Exempt | | 4/19 | | |
| he hee cas For speany iun exe | property you liseded, fill out and se number (if known each item of pecific dollar and y applicable stands—may be upemption to a pathe applicable art 1: Identif | sted on Schedule A/B: Property dattach to this page as many coown). property you claim as exempnount as exempt. Alternative atutory limit. Some exemption limited in dollar amount. However, and the statutory amount. The property You Claim as exemptions are you claiming the data of the property of the | ty (Official Form 106A/B) copies of Part 2: Additional property, you must specify the ly, you may claim the fors—such as those for the value of the property beautiful property. Exempt g? Check one only, even | g together, both are equally responsible for as your source, list the property that you nal Page as necessary. On the top of any the amount of the exemption you claim. Full fair market value of the property bear health aids, rights to receive certain to exemption of 100% of fair market value ty is determined to exceed that amount the information of the property bear if your spouse is filing with you. | One way of eing exempto penefits, and under a la | empt. If more space is ages, write your name and doing so is to state a ed up to the amount of a tax-exempt retirement aw that limits the | | |
| | _ | ■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| ^ | | aiming federal exemptions. 11 | しいろしょうとというにと | | | | | |
| | For any prop | articular list on Cohodula A | - , , , , | smut fill in the information below | | | | |
| | Brief description | | B that you claim as exc | empt, fill in the information below. | Specific la | ws that allow exemption | | |
| ۷. | | erty you list on Schedule A/i on of the property and line on that lists this property | - , , , , | empt, fill in the information below. Amount of the exemption you claim | Specific la | ws that allow exemption | | |
| ۷. | | on of the property and line on | B that you claim as exe | • • | Specific la | ws that allow exemption | | |
| ۷. | Schedule A/B to | on of the property and line on that lists this property ne Staten Island, NY 1030 | B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim | Specific la | · | | |
| ۷. | 34 Opal Lar Richmond (| on of the property and line on that lists this property ne Staten Island, NY 1030 | B that you claim as exc Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | · | · | | |

Official Form 106C

| Debtor 2 (Spouse if, filing) First Name Middle Name La United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims Se Be as complete and accurate as possible. If two married people are filing together, Is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | ecured by poth are equally his form. On the edules. You have been separately part 2. As | responsible for sup top of any addition | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | |
|---|---|--|--|---------------------------------------|
| Debtor 2 (Spouse if, filing) First Name Middle Name La United States Bankruptcy Court for the: Case number (if known) Defficial Form 106D Schedule D: Creditors Who Have Claims Se Be as complete and accurate as possible. If two married people are filing together, Is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedule Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | ecured by ooth are equally his form. On the edules. You have early Part 2. As | responsible for sup top of any additions ave nothing else to Column A | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YOU Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims See Be as complete and accurate as possible. If two married people are filing together, is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedule. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | ecured by ooth are equally his form. On the edules. You have equally equally early and a separately early early. As | responsible for sup top of any additions ave nothing else to Column A | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| Case number (if known) Official Form 106D Schedule D: Creditors Who Have Claims Set Be as complete and accurate as possible. If two married people are filing together, I is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other sch Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | ecured by poth are equally his form. On the edules. You have been separately part 2. As | responsible for sup top of any additions ave nothing else to Column A | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| Official Form 106D Schedule D: Creditors Who Have Claims Set Be as complete and accurate as possible. If two married people are filing together, is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other scharce. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As | responsible for sup top of any additions ave nothing else to Column A | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| Official Form 106D Schedule D: Creditors Who Have Claims Set Be as complete and accurate as possible. If two married people are filing together, I is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other scharce. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As | responsible for sup top of any additions ave nothing else to Column A | amend poplying correct informate all pages, write your nare a report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| Schedule D: Creditors Who Have Claims Set Be as complete and accurate as possible. If two married people are filing together, is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other scheduler. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As | responsible for sup top of any additions ave nothing else to Column A | oplying correct information all pages, write your name or report on this form. Column B Value of collateral | 12/15 tion. If more space me and case |
| Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As | responsible for sup top of any additions ave nothing else to Column A | oplying correct information all pages, write your nare report on this form. Column B Value of collateral | tion. If more space me and case |
| Be as complete and accurate as possible. If two married people are filing together, is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other scherost Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As | responsible for sup top of any additions ave nothing else to Column A | oplying correct information all pages, write your nare report on this form. Column B Value of collateral | tion. If more space me and case |
| is needed, copy the Additional Page, fill it out, number the entries, and attach it to the number (if known). 1. Do any creditors have claims secured by your property? I No. Check this box and submit this form to the court with your other schen Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | edules. You hat separately Part 2. As A | ave nothing else to | o report on this form. Column B Value of collateral | column C |
| □ No. Check this box and submit this form to the court with your other sch ■ Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | separately Part 2. As A | Column A | Column B Value of collateral | |
| Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | separately Part 2. As A | Column A | Column B Value of collateral | |
| Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | r separately Part 2. As AD | Amount of claim | Value of collateral | |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | r separately Part 2. As AD | Amount of claim | Value of collateral | |
| for each claim. If more than one creditor has a particular claim, list the other creditors in much as possible, list the claims in alphabetical order according to the creditor's name. | r separately Part 2. As AD | Amount of claim | Value of collateral | |
| much as possible, list the claims in alphabetical order according to the creditor's name. | D | | | Hneacurad |
| 0.4 Wells Forms | Vä | alue of collateral. | that supports this claim | portion If any |
| 2.1 Wells Fargo Describe the property that secures the | | \$550,000.00 | \$600,000.00 | \$0.00 |
| Creditor's Name 34 Opal Lane Staten Island, NY 10309 Richmond County | | | | |
| As of the date you file, the claim is: Cherapply. | k all that | | | |
| ☐ Contingent | | | | |
| Number, Street, City, State & Zip Code Unliquidated | | | | |
| ☐ Disputed | | | | |
| Who owes the debt? Check one. Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | gage or secured | | | |
| Debtor 2 only | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechan | ic's lien) | | | |
| ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this claim relates to a ☐ Other (including a right to offset) ☐ Community debt | | | | |
| Date debt was incurred Last 4 digits of account number | | | | |
| | | | | |
| Add the dollar value of your entries in Column A on this page. Write that number | here: | \$550,000 | 0.00 | |
| If this is the last page of your form, add the dollar value totals from all pages. Write that number here: | | \$550,000 | | |
| Part 2: List Others to Be Notified for a Debt That You Already Listed | | | • | |

debts in Part 1, do not fill out or submit this page.

Official Form 106D

| | | | | | | | - | | |
|------------------------------|--|--|--|---|---|---|--|---|-------------------------------------|
| Fill | in this inform | ation to identify your | case: | | | | | | |
| De | btor 1 | Joseph Dahari | | | | | | | |
| | | First Name | Middle Name | Last Nam | Э | | | | |
| | btor 2 | First Name | Middle Nome | Loot Nom | | | | | |
| (Spc | ouse if, filing) | FIRST Name | Middle Name | Last Nam | 9 | | | | |
| Uni | ited States Ban | kruptcy Court for the: | EASTERN DISTRICT C | F NEW YORK | | | | | |
| Ca | se number | | | | | | | | |
| | nown) | | | | | | ☐ Ch | eck if this | is an |
| | | | | | | | am | ended filir | ng |
| Of• | ficial Form | 106E/E | | | | | | | |
| | | | ha Haya Unasay | red Claim | _ | | | 4. | 2/15 |
| | | | ho Have Unsecue Part 1 for creditors with F | | | ar araditara with NON | IDDIODITY eleim | | |
| any Scho Scho left. | executory contra edule G: Executo edule D: Credito | acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag | that could result in a claim ired Leases (Official Form 1 ured by Property. If more s e. If you have no information | . Also list executo 06G). Do not inclu pace is needed, co | ry contract ide any cre py the Part | s on Schedule A/B: I ditors with partially s you need, fill it out, | Property (Official secured claims the number the entri | Form 106/ hat are listed ies in the b | A/B) and on ed in oxes on the |
| Pai | rt 1: List All | of Your PRIORITY Un | secured Claims | | | | | | |
| 1. | Do any creditor | s have priority unsecure | d claims against you? | | | | | | |
| | ☐ No. Go to Pa | ırt 2. | | | | | | | |
| | Yes. | | | | | | | | |
| 2. | identify what type possible, list the Part 1. If more th | e of claim it is. If a claim ha claims in alphabetical orden nan one creditor holds a pa | s. If a creditor has more than is both priority and nonpriority ar according to the creditor's ricular claim, list the other creditor's ricular claim. | amounts, list that on name. If you have meditors in Part 3. | claim here a nore than tw | nd show both priority a | and nonpriority am | nounts. As n | nuch as |
| | (For an explanat | tion of each type of claim, s | ee the instructions for this for | m in the instruction | booklet.) | Total claim | Priority amount | Nonp amou | oriority unt |
| 2.1 | U.S. Dep | t of Treasury | Last 4 digits o | f account number | 447B | \$9,680.15 | \$0 | .00_ | \$9,680.15 |
| | Priority Cred | ditor's Name | When was the | debt incurred? | 2/13/17 | | | | |
| | | 979101 uis, MO 63197-9000 | | debt incurred? | 2/13/17 | | - | | |
| | | eet City State Zip Code | | you file, the claim | is: Check a | III that apply | | | |
| | Who incurred | the debt? Check one. | ☐ Contingent | | | | | | |
| | Debtor 1 on | nly | ☐ Unliquidated | d | | | | | |
| | Debtor 2 on | nly | ☐ Disputed | | | | | | |
| | Debtor 1 an | nd Debtor 2 only | • | ITY unsecured cla | ıim: | | | | |
| | _ | e of the debtors and another | Domestic su | pport obligations | | | | | |
| | _ | is claim is for a commu | • | certain other debts | ou owe the | government | | | |
| | | ubject to offset? | • | eath or personal in | | - | | | |
| | No No | abject to onset: | | | | | | | |
| | ☐ Yes | | ☐ Other. Spec | шу | | | | | |
| | | | | | | | | | |
| _ | | () | | | | | | | |
| | | of Your NONPRIORIT | | | | | | | |
| 3. | | | cured claims against you? | | | | | | |
| | ☐ No. You have | e nothing to report in this p | art. Submit this form to the co | urt with your other | schedules. | | | | |
| | Yes. | | | | | | | | |
| 4. | List all of your | nonpriority unsecured cl | aims in the alphabetical ord | ler of the creditor | who holds | each claim. If a credit | or has more than | one nonpri | oritv |
| | unsecured claim | , list the creditor separately | / for each claim. For each cla st the other creditors in Part 3 | im listed, identify wl | nat type of c | laim it is. Do not list cl | aims already inclu | ded in Part | 1. If more |

Total claim

Official Form 106 E/F

| Debtor | Joseph D |)ahari | | Case no | umber (if know | n) | |
|-------------------------------|---|---|--|------------|------------------|---|-------------------------|
| | Con Edisor | | Last 4 digits of account number | 0012 | | - | \$5,450.00 |
| | Cooper Sta PO Box 138 | tion | When was the debt incurred? | | | | |
| _ | Number Street | NY 10726-0138 City State Zip Code the debt? Check one. | As of the date you file, the claim | is: Check | k all that apply | | |
| | ■ Debtor 1 on | | Пол | | | | |
| | | | ☐ Contingent | | | | |
| | ☐ Debtor 2 on ☐ Debtor 1 an | | ☐ Unliquidated | | | | |
| | _ | - | ☐ Disputed Type of NONPRIORITY unsecure | ed claim: | | | |
| | | of the debtors and another | ☐ Student loans | o olalili. | | | |
| | debt | is claim is for a community | ☐ Obligations arising out of a sep. | aration ac | reement or div | vorce that you did not | |
| | Is the claim su | bject to offset? | report as priority claims | | , | , | |
| | ■ No | | Debts to pension or profit-sharing | ng plans, | and other simi | lar debts | |
| | ☐ Yes | | ■ Other. Specify Utility bill | | | | |
| | National Gr | | Last 4 digits of account number | 7515 | | | \$370.00 |
| | Nonpriority Cred 1 Metrotech | n Center | When was the debt incurred? | | | | |
| _ | | City State Zip Code the debt? Check one. | As of the date you file, the claim | is: Check | k all that apply | | |
| | Debtor 1 on | ly | ☐ Contingent | | | | |
| | Debtor 2 on | ly | ☐ Unliquidated | | | | |
| | Debtor 1 an | d Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | | | |
| | ☐ Check if thi | is claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim su | bject to offset? | Obligations arising out of a sep report as priority claims | aration aç | greement or div | vorce that you did not | |
| | No | | Debts to pension or profit-shari | ng plans, | and other simi | lar debts | |
| | ☐ Yes | | Other. Specify utility bill | | | | |
| Part 3: | List Others | s to Be Notified About a Debt | That You Already Listed | | | | |
| is tryin have n notifie | ng to collect fro nore than one o d for any debts | m you for a debt you owe to som creditor for any of the debts that you in Parts 1 or 2, do not fill out or | | n Parts 1 | or 2, then list | the collection agency | here. Similarly, if you |
| | | | s. This information is for statistical | reporting | purposes on | ly. 28 U.S.C. §159. Add | the amounts for each |
| ٠. | | | | | | Total Claim | |
| Total | 6a. | Domestic support obligations | | 6a. | \$ | 0.00 | |
| claims from Par | r t 1 6b. | Taxes and certain other debts | you owe the government | 6b. | \$ | 9,680.15 | |
| | 6c. | Claims for death or personal in | <u> </u> | 6c. | \$ | 0.00 | |
| | 6d. | Other. Add all other priority unser | cured claims. Write that amount here. | 6d. | \$ | 0.00 | |
| | 6e. | Total Priority. Add lines 6a throu | gh 6d. | 6e. | \$ | 9,680.15 | |
| | | | | | 1 | Total Claim | |
| Total claims | 6f. | Student loans | | 6f. | \$ | 0.00 | |
| from Par | rt 2 6g. | | paration agreement or divorce that | 6~ | ¢ | 0.00 | |
| | 6h. | you did not report as priority cl Debts to pension or profit-shar | aims ing plans, and other similar debts | 6g. 6h. | \$ \$ | 0.00 | |

Official Form 106 E/F

| Debtor 1 | Joseph | n Da | ıhari | Case nui | mber (if known) | | |
|----------|--------|------|---|----------|-----------------|----------|--|
| | 6 | | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 5,820.00 | |
| | 6 | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 5,820.00 | |

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|--------------------|------------|--|
| Debtor 1 | Joseph Dahari | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | EASTERN DISTRICT C | F NEW YORK | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| 1 | Person or | company with Name, Number | whom you have the , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | - | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | <u> </u> |

Official Form 106G

| Fill in this | information to identify your | case: | | | |
|-----------------------------|---|-------------------------------|-------------------------|--|-------------------|
| Debtor 1 | Joseph Dahari | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | c) First Name | Middle Nome | Lost Name | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | EASTERN DISTRICT C | F NEW YORK | | |
| Case numb | ner | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| ⊃tt: -: - I | Гажа 40011 | | | | |
| | Form 106H | | | | |
| Sched | ule H: Your Cod | lebtors | | 12/ | /15 |
| our name | nd number the entries in the and case number (if known ou have any codebtors? (If |). Answer every question | | e this page. On the top of any Additional Pages, wr | ite |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | nin the last 8 years, have yo a, California, Idaho, Louisiana | | | ry? (Community property states and territories include ington, and Wisconsin.) | |
| ■ No | Go to line 3. | | | | |
| _ | . Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | . Dia your opouco, former opo | aco, or logar oquivalent iiv | o with you at the time. | | |
| in line Form 1 out Co | 2 again as a codebtor only | if that person is a guarar | tor or cosigner. Make | r if your spouse is filing with you. List the person sl sure you have listed the creditor on Schedule D (O:06G). Use Schedule D, Schedule E/F, or Schedule G | fficial to fil |
| | lame, Number, Street, City, State and Z | IP Code | | Check all schedules that apply: | |
| 2.1 | | | | □ Schodulo D. lino | |
| 3.1 | Name | | | | |
| | | | | ☐ Schedule G, line | |
| . | | | | | |
| | Number Street City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | Number Street | | | _ | |
| C | City | State | ZIP Code | | |

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| Fill | in this information to identify your c | ase: | | | | | | |
|--------------------|--|---------------------------------|--|-----------------------|--------------|-------------------------------|--|-------------------|
| Del | otor 1 Joseph Dah | ari | | | _ | | | |
| | otor 2 | | | | _ | | | |
| Uni | ted States Bankruptcy Court for the | : EASTERN DISTRICT | OF NEW YORK | | _ | | | |
| | se number | | - | | | | ent showing postpetition | |
| \bigcirc | fficial Form 106I | | | | | | as of the following date |): |
| | chedule I: Your Inc | ome | | | | MM / DD/ Y | YYY | 12/1 |
| sup spo atta | as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment** | are married and not filing wi | ng jointly, and your ith you, do not inclu | spouse i de inforr | s living wi | th you, inclu out your spo | ude information abou ouse. If more space is | t your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-filing spouse | . |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | ■ Employed | _ | | | pyed | |
| | | | ☐ Not employed | | | ☐ Not er | mployed | |
| | Include part-time, seasonal, or | Occupation | Manager | | | | | |
| | self-employed work. Occupation may include student or homemaker, if it applies. | lude student Employer's address | | | | | | |
| Par | t 2: Give Details About Mor | How long employed to | here? <u>18 mo</u> n | nths | | | | |
| | mate monthly income as of the duse unless you are separated. | | you have nothing to r | eport for | any line, wi | rite \$0 in the | space. Include your no | on-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the informatio | n for all e | mployers for | or that perso | n on the lines below. If | you need |
| | | | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,299.83 | \$ N/A | _ |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ N/A | _ |
| 4. | Calculate gross Income. Add lin | ne 2 + line 3. | | 4. | \$ 3, | 299.83 | \$ <u>N/A</u> | |

Official Form 106l Schedule I: Your Income page 1

| Debte | or 1 _ | Joseph Dahari | - | C | Case number (if kn | own) | | | | |
|-------|-------------------|--|------------|----------|--------------------|--------------|-----------|----------------------|--------------------|----------|
| | | | | | | | | | | |
| | | | | | For Debtor 1 | | | Debtor n-filing s | | |
| | Copy | y line 4 here | 4. | _ | \$ 3,299 | .83 | \$ | | N/A | _ |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ 1,408 | 3.33 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | · | .00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ 0 | .00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | | .00 | \$_ | | N/A | _ |
| | 5e. | Insurance | 5e. | | . — | .00 | \$_ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | | | 0.00 | \$_ | | N/A | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: NYS Tax garnishment | 5g. 5h. | | | 0.00 5.00 | *_ + | | N/A N/A | _ |
| 0 | | | _ | | | | | | | - |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ <u>1,733</u> | | \$_ | | N/A | _ |
| 7. | | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$1,566 | 5.50 | \$_ | | N/A | - |
| 8. | | all other income regularly received: | | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | | | | | | | | |
| | | Attach a statement for each property and business showing gross | | | | | | | | |
| | | receipts, ordinary and necessary business expenses, and the total | 00 | | ¢ 4.000 | | φ | | N1/A | |
| | 8b. | monthly net income. Interest and dividends | 8a. 8b. | | \$1,000 \$ | 0.00 | \$_ \$ | | N/A N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | • | Ψ | .00 | Ψ_ | | IN/A | _ |
| | | regularly receive | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | 0 - | | Φ | | Φ. | | 21/4 | |
| | 04 | settlement, and property settlement. | 8c. | | | 0.00 | \$_ | | N/A | _ |
| | 8d. 8e. | Unemployment compensation Social Security | 8d. 8e. | | | 0.00 | \$_ \$ | | N/A N/A | _ |
| | 8f. | Other government assistance that you regularly receive | 00. | • | Ψ | .00 | Ψ_ | | IN/A | - |
| | ··· | Include cash assistance and the value (if known) of any non-cash assistance | | | | | | | | |
| | | that you receive, such as food stamps (benefits under the Supplemental | | | | | | | | |
| | | Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | \$ 0 | .00 | \$ | | N/A | |
| | 8g. | Pension or retirement income | – 8g. | | · | 0.00 | \$_ | | N/A | _ |
| | 8h. | Other monthly income. Specify: Daughters contribution | 8h. | | | | + \$ _ | | N/A | _ |
| | | | _ | Г | | | | | | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,400 | 0.00 | \$_ | | N/A | 4 |
| 10 | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$ | 2,966.50 | + \$ | | N/A | = \$ | 2,966.50 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | – | 2,300.30 | - | | 14/7 | - | 2,300.30 |
| 11 | | e all other regular contributions to the expenses that you list in Schedule | ., _ | | | | | | I | |
| | | de contributions from an unmarried partner, members of your household, your | | nde | ents, your room | mates | s, and | | | |
| | | friends or relatives. | | | | | | | | |
| | Do no | ot include any amounts already included in lines 2-10 or amounts that are not a | availa | able | to pay expense | es list | ed in | | <i>∋ J.</i> +\$ | 0.00 |
| | Opec | | | | | | | | | 0.00 |
| 12. | Add | the amount in the last column of line 10 to the amount in line 11. The res | ult is | the | combined mon | thly ir | come |) . | | |
| | | that amount on the Summary of Schedules and Statistical Summary of Certain | n Lial | bilit | ies and Related | l Data | , if it | 12. | • | 2,966.50 |
| | appli | es | | | | | | 14. | Ψ | 2,000.00 |
| | | | | | | | | | Combi | |
| 13 | Dov | ou expect an increase or decrease within the year after you file this form | ? | | | | | | month | y income |
| | = | No. | • | | | | | | | |
| | $\overline{\Box}$ | Yes. Explain: | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

| Fill | in this information to identify your case: | | | | |
|-----------|---|---|------------------------------|---------------------------------------|--|
| Deb | otor 1 Joseph Dahari | | Check | t if this is: | |
| Deh | otor 2 | | _ | An amended filing | ving postpetition chapter |
| | ouse, if filing) | | | | the following date: |
| Unit | ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO | ORK | | MM / DD / YYYY | |
| | se number | | | | |
| (If k | nown) | | | | |
| 0 | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/15 |
| Be | as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question. | | | | |
| Par 1. | t 1: Describe Your Household Is this a joint case? | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i> | for Separate House | <i>hold</i> of Debto | or 2. | |
| 2. | Do you have dependents? ☐ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | Daughter | | 16 | ■ Yes □ No |
| | | | | | □ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| 3. | Do your expenses include ■ No | | | | ☐ Yes |
| | expenses of people other than yourself and your dependents? | | | | |
| Est | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date. | ou are using this fo lemental <i>Schedul</i> e | orm as a sup J, check the | pplement in a Cha box at the top o | pter 13 case to report f the form and fill in the |
| the | lude expenses paid for with non-cash government assistance in value of such assistance and have included it on Schedule I: Yeficial Form 106I.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot. | nclude first mortgage | 4. \$ | | 2,200.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| _ | 4d. Homeowner's association or condominium dues | | 4d. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as how | me equity loans | 5. \$ | | 0.00 |

| Debtor 1 | Joseph Dahari | Case num | ber (if known) | |
|------------------|--|--------------|----------------|--------------------------|
| S. Utilitie | | | _ | |
| | ss: Electricity, heat, natural gas | 6a. | \$ | 300.00 |
| | Water, sewer, garbage collection | 6b. | · | 100.00 |
| | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 300.00 |
| | Other. Specify: | 6d. | * | 0.00 |
| | and housekeeping supplies | od. 7. | \$ | 500.00 |
| | care and children's education costs | 8. | \$ | 0.00 |
| - | ng, laundry, and dry cleaning | 9. | \$ | |
| | | 10. | \$ | 50.00 |
| | nal care products and services | | · | 0.00 |
| | al and dental expenses | 11. | \$ | 20.00 |
| | portation. Include gas, maintenance, bus or train fare. | 12. | \$ | 80.00 |
| | include car payments. ainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| | able contributions and religious donations | 14. | · | 0.00 |
| | | 14. | Ψ | 0.00 |
| 5. Insura | include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | Health insurance | 15b. | · | 0.00 |
| | Vehicle insurance | 15b. 15c. | · | 250.00 |
| | Other insurance. Specify: | 15d. | * | 0.00 |
| | · · <u></u> | 13u. | Ψ | 0.00 |
| Specif | Do not include taxes deducted from your pay or included in lines 4 or 20. y: | 16. | \$ | 0.00 |
| | ment or lease payments: | | | |
| | Car payments for Vehicle 1 | 17a. | * | 0.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c. | Other. Specify: | 17c. | \$ | 0.00 |
| 17d. | Other. Specify: | 17d. | \$ | 0.00 |
| | payments of alimony, maintenance, and support that you did not report | | \$ | 0.00 |
| | ted from your pay on line 5, Schedule I, Your Income (Official Form 10 | 61). | \$ | |
| | payments you make to support others who do not live with you. | 19. | Φ | 0.00 |
| Specif | y | | our Income | |
| | Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | · | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | Maintenance, repair, and upkeep expenses | 20d. | · | |
| | | | · | 0.00 |
| | Homeowner's association or condominium dues | 20e. | | 0.00 |
| 1. Other | Specify: | 21. | +\$ | 0.00 |
| | late your monthly expenses | | | |
| | dd lines 4 through 21. | | \$ | 3,850.00 |
| 22b. C | copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | J-2 | \$ | |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | | \$ | 3,850.00 |
| 3. Calcu | late your monthly net income. | | | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,966.50 |
| | Copy your monthly expenses from line 22c above. | 23b. | · | 3,850.00 |
| 22 | Out to a transport of the same | | | |
| | Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -883.50 |
| For exa | u expect an increase or decrease in your expenses within the year after imple, do you expect to finish paying for your car loan within the year or do you expect ation to the terms of your mortgage? | | | or decrease because of a |
| ■ No. | | | | |
| ☐ Yes | Explain here: | | | |

| Fill in this infor | mation to identify your | case: | | |
|-------------------------------------|--|---------------------------|------------------------------------|---|
| Debtor 1 | Joseph Dahari | | | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | EASTERN DISTRICT OF | F NEW YORK | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| Official For | | n Individual | Debtor's Sched | u les 12/15 |
| obtaining mone years, or both. 1 | y or property by fraud ir 18 U.S.C. §§ 152, 1341, 1 gn Below | connection with a bank | ruptcy case can result in fines u | a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attorn | ney to help you fill out bankrupto | cy forms? |
| ■ No | | | | |
| ☐ Yes. | Name of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sumn | nary and schedules filed with th | is declaration and |
| X /s/ Jos | seph Dahari | | X | |
| Josep | h Dahari ure of Debtor 1 | | Signature of Debtor 2 | |
| Date | December 19, 2019 | | Date | |
| | | | | |

Official Form 106Dec

| Fill | in this in | formation to identify you | case: | | | | |
|-------------------|----------------------------|--|---|--|---------------------------|---------------------|---|
| | btor 1 | Joseph Dahari | | | | | |
| | | First Name | Middle Name | Last Name | | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | | |
| Uni | ited States | Bankruptcy Court for the: | EASTERN DISTRICT O | F NEW YORK | | | |
| Ca | aa numba | | | | | | |
| | se numbe nown) | | | | | _ | heck if this is an mended filing |
| Of | ficial l | Form 107 | | | | | |
| | | | Affairs for Indivi | duals Filing | g for Bankrup | tcy | 4/19 |
| info nun | rmation. nber (if kr | If more space is needed, lown). Answer every ques | | this form. On the | | | |
| | | | rital Status and Where Yo | u Lived Before | | | |
| 1. | What is | your current marital statu | s? | | | | |
| | ☐ Mar | ried | | | | | |
| | Not | married | | | | | |
| 2. | During t | he last 3 years, have you | lived anywhere other thar | where you live no | ow? | | |
| | ■ No | | | | | | |
| | ☐ Yes | . List all of the places you I | ved in the last 3 years. Do r | not include where yo | ou live now. | | |
| | Debtor | 1 Prior Address: | Dates Debtor 1 | l Debtor | 2 Prior Address: | | Dates Debtor 2 lived there |
| 3. stat | | | rer live with a spouse or le ifornia, Idaho, Louisiana, N | | | | |
| | ■ No | | | | | | |
| | ☐ Yes | . Make sure you fill out Sch | nedule H: Your Codebtors (C | Official Form 106H). | | | |
| Pa | rt 2 Ex | plain the Sources of You | r Income | | | | |
| 4. | Fill in the | total amount of income yo | nployment or from operati u received from all jobs and have income that you recei | all businesses, incl | uding part-time activitie | S. | dar years? |
| | □ No | | | | | | |
| | Yes | . Fill in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deduction exclusions) | Sources of Check all t | | Gross income (before deductions and exclusions) |
| | | ry 1 of current year until filed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$40 | ,000.00 | commissions, ips | |
| | | | ☐ Operating a business | | ☐ Operati | ng a business | |

Official Form 107

| De | ebtor 1 Joseph Dahari | | | | | | Case number (if known) | | | | |
|---|-----------------------|--------------------------|--|--|--|---|--|--|--------------------------|---|--|
| | | | | | | | | | | | |
| | | | | | Debtor 1 | | | Debtor 2 | | | |
| | | | | | Sources of income Check all that apply. | Gross income (before deduction exclusions) | ons and | Sources of inco Check all that ap | | Gross income (before deductions and exclusions) | |
| | | | dar year: December | 31, 2018) | ■ Wages, commissions, bonuses, tips | \$70, | 000.00 | ☐ Wages, comm bonuses, tips | nissions, | | |
| | | | | | ☐ Operating a business | | | ☐ Operating a b | usiness | | |
| | | | dar year bei December | | ☐ Wages, commissions, bonuses, tips | \$25, | 000.00 | ☐ Wages, comm bonuses, tips | nissions, | | |
| | | | | | Operating a business | | | ☐ Operating a b | usiness | | |
| 5. | Inclu and winr | ude indother nings. each | come regard public benef If you are fili | lless of wheth iit payments; ng a joint cas he gross inco | e during this year or the two her that income is taxable. Ex- pensions; rental income; inter- se and you have income that your me from each source separar | emples of other inco rest; dividends; mor rou received togeth | ome are al ney collect er, list it o | ed from lawsuits; ronly once under Deb | oyalties; and otor 1. | | |
| | | | | | Debtor 1 | | | Debtor 2 | | | |
| | | | | | Sources of income Describe below. | Gross income reach source (before deduction exclusions) | | Sources of inco Describe below. | me | Gross income (before deductions and exclusions) | |
| Pa | rt 3: | Lis | Certain Pa | yments You | Made Before You Filed for | Bankruptcy | | | | | |
| 6. | Are □ | eithe No. | Neither De | ebtor 1 nor D | 's debts primarily consume Debtor 2 has primarily consu- personal, family, or househo | ımer debts. Consu | ımer debts | are defined in 11 l | J.S.C. § 10 ⁻ | 1(8) as "incurred by an | |
| | | | During the | 90 days befo | ore you filed for bankruptcy, di | d you pay any cred | itor a total | of \$6,825* or more | ∍? | | |
| | | | □ No. | Go to line 7 | | | | | | | |
| ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | | | nd alimony. Also, do | | | |
| | | | • | • | , , | | | or arror arro date or | , | | |
| | | Yes. | | | r both have primarily consu ore you filed for bankruptcy, di | | itor a total | of \$600 or more? | | | |
| | | | ■ No. | Go to line 7 | | | | | | | |
| | | | ☐ Yes | include pay | each creditor to whom you pai ments for domestic support o this bankruptcy case. | · · | | , | • | | |
| | Cre | editor' | s Name and | d Address | Dates of payme | nt Total ar | nount paid | Amount you still owe | Was this p | payment for | |

| Del | btor 1 Joseph Dahari | | Cas | se number (if known) | | |
|------|--|--|--|---|----------------------------------|---|
| | | | | | | |
| 7. | Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen control, or owner of 20% of | eral partners; partners r more of their voting | erships of which yog g securities; and a | ou are a genera ny managing a | al partner; corporations agent, including one for |
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a d | ebt that benefited an |
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment ditor's name |
| Par | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details. | cases, small claims action | s, divorces, collectio | n suits, paternity a | ctions, suppor | t or custody |
| | Case title Case number | Nature of the case | Court or agency | | Status of th | ne case |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | Describe the Property | | oreclosed, garnis | shed, attached | d, seized, or levied? Value of the property |
| | | Explain what happened | 1 | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details. | | luding a bank or fir | nancial institutior | i, set off any a | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | Date taker | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | | | efit of creditors, a |
| Por | | | | | | |
| Fall | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | etcy, did you give any gift | s with a total value | of more than \$60 | 0 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date: the g | s you gave ifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | | | |

| Del | btor 1 Joseph Dahari | | C: | ase number (| if known) | | | |
|-----|---|-----------------------------|--|----------------|--|-------------------------|--|--|
| | | | | | | | | |
| 14. | Within 2 years before you filed for bank ■ No | ruptcy, | did you give any gifts or contributions | s with a total | l value of more than | \$600 to any charity? | | |
| | ☐ Yes. Fill in the details for each gift or | contribu | tion. | | | | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo | | Describe what you contributed | | Dates you contributed | Value | | |
| Pai | rt 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | uptcy o | r since you filed for bankruptcy, did yo | ou lose anyt | hing because of thef | t, fire, other disaster | | |
| | ■ No | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Describe the property you lost and | Descr | ibe any insurance coverage for the lo | ss | Date of your | Value of property | | |
| | how the loss occurred | Includ | e the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: F | st pending | loss | lost | | |
| Pai | rt 7: List Certain Payments or Transfer | rs | | | | | | |
| | consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid | | | | in your bankruptcy. Date payment | Amount of | | |
| | Address Email or website address Person Who Made the Payment, if Not | You | transferred | . • | or transfer was made | payment | | |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | | |
| | No | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any prope transferred | rty | Date payment or transfer was made | Amount of payment | | |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al | ur busi r rs made | ness or financial affairs? as security (such as the granting of a se | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Person Who Received Transfer Address | | Description and value of property transferred | | any property or received or debts change | Date transfer was made | | |
| | Person's relationship to you | | | | | | | |
| 19. | Within 10 years before you filed for ban beneficiary? (These are often called asse | | | lf-settled tru | st or similar device o | of which you are a | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of trust | | Description and value of the proper | rty transferre | ed | Date Transfer was made | | |
| | | | | | | | | |

Debtor 1 Joseph Dahari Case number (if known) Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Type of account or Name of Financial Institution and Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Do you still Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City,

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

State and ZIP Code)

■ No

Owner's Name

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Code) Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

- 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?
 - No

☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it

Date of notice

Official Form 107

| Deb | otor 1 | Joseph Dahari | | Cas | e number (if known) | | | | | | |
|------------|---------|--|--|---|----------------------------------|-------------------|--|--|--|--|--|
| | | | | | | | | | | | |
| 25. | Hav | re you notified any governmental unit o | f any release of hazardous material? | | | | | | | | |
| | | | | | | | | | | | |
| | _ | No Yes. Fill in the details. | | | | | | | | | |
| | — Na | me of site | Governmental unit | | Environmental law, if you | Date of notice | | | | | |
| | Ad | dress (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | | know it | | | | | | |
| 26. | Hav | e you been a party in any judicial or ad | ministrative proceeding under any enviro | onm | ental law? Include settlements | and orders. | | | | | |
| | | No | | | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | | |
| | | se Title | Court or agency | Nati | ure of the case | Status of the | | | | | |
| | Ca | se Number | Name Address (Number, Street, City, State and ZIP Code) | | | case | | | | | |
| Par | t 11: | Give Details About Your Business or | , | | | | | | | | |
| | | | otcy, did you own a business or have any | v of t | he following connections to an | v business? | | | | | |
| ۷, | VVIL | | in a trade, profession, or other activity, e | | - | y business: | | | | | |
| | | | pany (LLC) or limited liability partnership | | • | | | | | | |
| | | | party (LLC) or infinited hability partnership | b (Fr | -F) | | | | | | |
| | | ☐ A partner in a partnership | | | | | | | | | |
| | | ☐ An officer, director, or managing ex | xecutive of a corporation | | | | | | | | |
| | | ☐ An owner of at least 5% of the votir | ng or equity securities of a corporation | | | | | | | | |
| | | No. None of the above applies. Go to | Part 12. | | | | | | | | |
| | | Yes. Check all that apply above and fil | II in the details below for each business. | • | | | | | | | |
| | | siness Name | | Employer Identification number | | | | | | | |
| | | dress mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Securit Dates business existed | | number or ITIN. | | | | | |
| | | | | | | | | | | | |
| 28. | | nin 2 years before you filed for bankrup itutions, creditors, or other parties. | otcy, did you give a financial statement to | o an | one about your business? Incl | ude all financial | | | | | |
| | | No | | | | | | | | | |
| | | Yes. Fill in the details below. | | | | | | | | | |
| | | me | Date Issued | | | | | | | | |
| | | dress mber, Street, City, State and ZIP Code) | | | | | | | | | |
| Par | t 12: | Sign Below | | | | | | | | | |
| hav | /e re | ad the answers on this Statement of Fi | inancial Affairs and any attachments, and | d I d | eclare under penalty of periury | that the answers | | | | | |
| | | | a false statement, concealing property, o \$250,000, or imprisonment for up to 20 | | | aud in connection | | | | | |
| | | . §§ 152, 1341, 1519, and 3571. | , 4230,000, or imprisonment for up to 20 | year | 3, 01 50011. | | | | | | |
| /s/ | Jos | eph Dahari | | | | | | | | | |
| | | n Dahari re of Debtor 1 | Signature of Debtor 2 | | | | | | | | |
| Dat | e _i | December 19, 2019 | Date | | | | | | | | |
| Did : | you | attach additional pages to Your Statem | ent of Financial Affairs for Individuals Fi | iling | for Bankruptcy (Official Form 1 | 07)? | | | | | |
| ■ N | | | | J | | • | | | | | |
| □Y | es | | | | | | | | | | |
| _ ` | | pay or agree to pay someone who is no | ot an attorney to help you fill out bankrup | ptcy | forms? | | | | | | |
| ■ N □ Y | | Name of Person Attach the Bankri | uptcy Petition Preparer's Notice, Declaration | n. ar | nd Signature (Official Form 119) | | | | | | |
| | | | ment of Financial Affairs for Individuals Filing | | • , , | page 6 | | | | | |

| Debtor 1 | Joseph Dahari | Case number (if known) | |
|----------|---------------|------------------------|--|
| | | | |

| Fill in this inform | nation to identify your | case: | | | | |
|-------------------------------------|---|--|-------------------------------|--|----------------|---|
| Debtor 1 | Joseph Dahari | | | | | |
| Debtor 2 | First Name | Middle Name | | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | | Last Name | | |
| United States Bar | nkruptcy Court for the: | EASTERN DISTR | RICT OF NEV | V YORK | | |
| Case number | | | | | ı | ☐ Check if this is an amended filing |
| | nt of Intentio | | | Filing Under Cha | pter 7 | 12/15 |
| | vidual filing under cha claims secured by yo | • | out this to | m ir: | | |
| You must file this whicher on the f | ver is earlier, unless th orm | rithin 30 days after e court extends th | you file you e time for ca | r bankruptcy petition or by the dat ause. You must also send copies t | o the credit | ors and lessors you list |
| | d date the form. | , | | ., respending to respending contra | | |
| write yo | our name and case nur | nber (if known). | s needed, at | tach a separate sheet to this form. | On the top | of any additional pages, |
| 1. For any credito | - | | : Creditors | Who Have Claims Secured by Prop | perty (Officia | al Form 106D), fill in the |
| information be Identify the cre | iow. editor and the property t | hat is collateral | What do y | you intend to do with the property a debt? | | olid you claim the property s exempt on Schedule C? |
| | | | | | | |
| Creditor's W name: | ells Fargo | | | der the property. the property and redeem it. | | □ No |
| Description of | 34 Opal Lane State | en Island, NY | Retain | the property and enter into a rmation Agreement. | | Yes |
| property securing debt: | 10309 Richmond | | | the property and [explain]: | | |
| | | | | | | |
| | ur Unexpired Persona | | in Calcadula | C. Francisco Contracto and Huna | | (Official Forms 4000) fill |
| in the information | n below. Do not list rea | ıl estate leases. Un | expired leas | e G: Executory Contracts and Une ses are leases that are still in effec- does not assume it. 11 U.S.C. § 365 | t; the lease | period has not yet ended. |
| Describe your u | nexpired personal pro | perty leases | | | Will th | ne lease be assumed? |
| Lessor's name: | | | | | □ No |) |
| Description of lea Property: | sea | | | | ☐ Ye | es |
| Lessor's name: | | | | | □ No |) |
| Description of lea Property: | sea | | | | ☐ Ye | es |
| Lessor's name: | | | | | □ No |) |
| Official Form 108 | | Statement of In | tention for l | ndividuals Filing Under Chapter 7 | | page 1 |

| Deb | otor 1 | Joseph Dahari | Case number (if | known) |
|-----|----------|--|--|-------------------------------------|
| | | | | |
| | | n of leased | | <u>_</u> |
| Pro | perty: | | | ☐ Yes |
| Les | sor's na | ame: | | □ No |
| Des | cription | n of leased | | — 140 |
| Pro | perty: | | | ☐ Yes |
| Les | sor's na | ame: | | □ No |
| Des | cription | n of leased | | |
| Pro | perty: | | | ☐ Yes |
| Les | sor's na | ame: | | □ No |
| Des | cription | n of leased | | |
| Pro | perty: | | | ☐ Yes |
| Les | sor's na | ame: | | □ No |
| | | n of leased | | |
| Pro | perty: | | | ☐ Yes |
| Par | t 3: | Sign Below | | |
| | | alty of perjury, I declare that I have indicate nat is subject to an unexpired lease. | ed my intention about any property of my estate th | nat secures a debt and any personal |
| Χ | /s/ Jo | oseph Dahari | X | |
| | Jose | ph Dahari | Signature of Debtor 2 | |
| | Signa | ature of Debtor 1 | | |
| | Date | December 19, 2019 | Date | |
| | | | | |

| Fill ir | this inforr | nation to identify your case: | | | | | irected in this form and | in Form |
|------------------|-------------------------------------|---|--|---|----------------------|--|---|----------------------------------|
| Debt | or 1 | Joseph Dahari | | | 122A | -1Supp: | | |
| Debt | or 2 | | | | | | | |
| | se, if filing) | | | | | 1. There is no pres | umption of abuse | |
| _ | | Bankruptcy Court for the: Eastern Distri | ct of New Y | ork | | applies will be n | o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2). | |
| Case (if kno | e number _{wn)} | | | | | , | does not apply now be | annua of |
| | • | | | | | | service but it could ap | |
| | | | | | | Check if this is a | n amended filing | |
| Off | icial F | orm 122A - 1 | | | | | o o | |
| | | 7 Statement of Your C | urrent | t Monthly | Inco | me | | 12/19 |
| <u> </u> | арісі | 7 Statement of Tour C | | t Worthing | 11100 | 71110 | | 12/13 |
| attach case r | a separate number (if k | nd accurate as possible. If two married peon sheet to this form. Include the line number the sown). If you believe that you are exempte by service, complete and file Statement of E. | r to which the | e additional informa sumption of abuse I | ation app because | olies. On the top of a you do not have prin | ny additional pages, wri narily consumer debts o | te your name and or because of |
| Part | 1: Ca | Iculate Your Current Monthly Income | | | | | | |
| 1. | What is v | our marital and filing status? Check or | ne only. | | | | | |
| | • | arried. Fill out Column A, lines 2-11. | ,. | | | | | |
| | ☐ Marrie | d and your spouse is filing with you. F | Fill out both | Columns A and B, | lines 2- | 11. | | |
| | ■ Marrie | d and your spouse is NOT filing with y | vou. You an | nd vour spouse ar | re: | | | |
| | _ | ng in the same household and are not | | • | | mns A and B. lines | 2-11. | |
| | | ng separately or are legally separated. | | | | | | ı declare under |
| | pen | alty of perjury that you and your spouse g apart for reasons that do not include e | are legally s | eparated under no | onbankr | uptcy law that applic | es or that you and your | |
| 10 the | 1(10A). For e 6 months, | rage monthly income that you received froi example, if you are filing on September 15, the add the income for all 6 months and divide the he same rental property, put the income from | e 6-month per total by 6. Fil | riod would be March Il in the result. Do not | 1 through t include | n August 31. If the amo any income amount m | ount of your monthly incon ore than once. For examp | ne varied during ble, if both |
| эp | ouses own t | ne same remai property, put the income nom | mat property i | in one column only. II | | Column A | Column B | Jace. |
| | | | | | | Pebtor 1 | Debtor 2 or non-filing spouse | |
| 2. | Your gros | ss wages, salary, tips, bonuses, overti | me, and co | mmissions (befor | re all | 0.040.00 | 5 1, 1 | |
| _ | payroll de | • | | | \$ | 3,046.00 | \$ | |
| 3. | • | and maintenance payments. Do not include is filled in. | lude payme | ents from a spouse | s if \$ | 0.00 | \$ | |
| 4. | of you or from an ur and room | nts from any source which are regular your dependents, including child sup married partner, members of your house mates. Include regular contributions from the one include payments you listed on line | port. Include hold, your of a spouse o | e regular contribut dependents, paren | tions nts, | 450.00 | \$ | |
| 5. | Net incon | ne from operating a business, profess | ion, or farm | | | | | |
| | | | | Debtor 1 | | | | |
| | | eipts (before all deductions) | \$_ | 0.00 | | | | |
| | | and necessary operating expenses | - \$ _ | 0.00 Copy he | oro -> ¢ | 0.00 | \$ | |
| c | | ly income from a business, profession, c ne from rental and other real property | or farm \$ | Copy ne | > φ | | Ψ | |
| 6. | Net incon | le from rental and other real property | | Debtor 1 | | | | |
| | Gross rec | eipts (before all deductions) | \$ | 1,000.00 | | | | |
| | | and necessary operating expenses | -\$ | 30.00 | | | | |
| | | ly income from rental or other real | · | Co | рру | | | |
| | property | | \$ | 970.00 he | ere -> \$ | 970.00 | \$ | |
| 7. | Interest, o | lividends, and royalties | | | \$ | 0.00 | \$ | |

Official Form 122A-1

| Debtor | ·1 <u>J</u> | Josep | oh Dahari | | | Case number | (if known) | | | |
|--------|--|--|---|--|--|-------------------|-------------|-----------------------------------|------------|-----------|
| | | | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | | |
| 8. | Unem | ployr | ment compensation | | | \$ | 0.00 | \$ | | |
| | the So For | ocial S you | r the amount if you contend that the amoun Security Act. Instead, list it here: \$ spouse \$ | | fit under | | | | | |
| | Pension benefit not incommend United disability pay pay does not be the pension of the pension o | on or it unde clude d State lity, or aid un not ex | retirement income. Do not include any an er the Social Security Act. Also, except as s any compensation, pension, pay, annuity, ones Government in connection with a disability death of a member of the uniformed service der chapter 61 of title 10, then include that proceed the amount of retired pay to which you der any provision of title 10 other than chap | tated in the next sente or allowance paid by the ty, combat-related inju- ces. If you received any pay only to the extent to u would otherwise be e | nce, do e ry or retired hat it | \$ | 0.00 | \$ | | |
| 10. | Incom Do not receive domes United disabil | ne fro t inclu ed as stic te d State lity, or | m all other sources not listed above. Specide any benefits received under the Social Sa victim of a war crime, a crime against hur rrorism; or compensation, pension, pay, and es Government in connection with a disability death of a member of the uniformed service a separate page and put the total below. | ecify the source and an Security Act; payments manity, or international nuity, or allowance paid ty, combat-related inju | or d by the ry or | | | | | |
| | | | | | | \$ | 0.00 | \$ | | |
| | | | | | | \$ | 0.00 | \$ | | |
| | | То | tal amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | |
| | | | rour total current monthly income. Add linn. Then add the total for Column A to the to | | \$ | 4,466.00 | + \$ | | Total | 4,466.00 |
| Part | 2: | Dete | rmine Whether the Means Test Applies t | o You | | | | | | |
| 10 | Calau | lata v | | Collow these stones | | | | | | |
| | | _ | your current monthly income for the year your total current monthly income from line | | | Сору | / line 11 h | nere=> | \$ | 4,466.00 |
| | N | ∕lultipl | y by 12 (the number of months in a year) | | | | | | X | 12 |
| | 12b. T | he re | sult is your annual income for this part of th | e form | | | | 12b. | \$ | 53,592.00 |
| 13. | Calcu | late t | he median family income that applies to | you. Follow these step | os: | | | | | |
| | Fill in t | the st | ate in which you live. | NY | | | | | | |
| | Fill in t | the nu | umber of people in your household. | 3 | | | | | | |
| | To find | d a lis | edian family income for your state and size t of applicable median income amounts, go . This list may also be available at the bank | online using the link sp | | in the separa | | 13. tions | \$ | 86,670.00 |
| 14. | How o | do the | e lines compare? | | | | | | | |
| | 14a. | | Line 12b is less than or equal to line 13. O | | eck box | 1, There is r | no presum | ption of abuse |) . | |
| | 14b. | | Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. | | , The pre | esumption of | abuse is o | determined by | Form 1 | 22A-2. |
| Part | 3: | Sian | Below | | | | | | | |
| airt | | | ning here, I declare under penalty of perjury | that the information or | n this sta | atement and | in any atta | chments is tru | ue and o | correct. |
| | X | /s/ . | Joseph Dahari | | | | | | | |
| | | | seph Dahari nature of Debtor 1 | | | | | | | |
| | Date | Dec | cember 19, 2019 | | | | | | | |

| Debtor 1 | Joseph Dahari | Case number (if known) | |
|---|---|------------------------|--|
| | MM / DD / YYYY | | |
| If you checked line 14a, do NOT fill out or file Form 122A-2. | | | |
| | If you checked line 14b, fill out Form 122A-2 and file it with this form. | | |

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

| | Eas | stern District of New Yor | k | |
|------|--|---|-----------------------|--------------------------------------|
| In | re | D.L. () | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPI | ENSATION OF ATTO | RNEY FOR D | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy | , or agreed to be pai | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 2,250.00 |
| | Prior to the filing of this statement I have received | 1 | \$ | 2,250.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed com | npensation with any other person | unless they are mer | nbers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n | | | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankruptcy | case, including: |
| | a. Analysis of the debtor's financial situation, and reneb. Preparation and filing of any petition, schedules, stac. Representation of the debtor at the meeting of creditd. [Other provisions as needed] | atement of affairs and plan whicl | n may be required; | |
| 6. | By agreement with the debtor(s), the above-disclosed f | ee does not include the following | g service: | |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding. | any agreement or arrangement for | r payment to me for | representation of the debtor(s) in |
| | December 19, 2019 | /s/ Jay Meyers | | |
| | Date | Jay Meyers | | |
| | | Signature of Attorn Jay Meyers, Esq | | |
| | | 1688 Victory Bou | llevard Ste. 201 | |
| | | Staten Island, N | | |
| | | 718 273-2525 Fa jay.mblaw@gma | | |
| | | <u>Jay.mbiaw@gma</u> Name of law firm | | |

United States Bankruptcy Court Eastern District of New York

| In re | Joseph Dahari | | Case No. | |
|-------|---------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

718 273-2525 Fax: 718 981-0433

USBC-44 Rev. 9/17/98

Con Edison Cooper Station PO Box 138 New York, NY 10726-0138

National Grid 1 Metrotech Center Brooklyn, NY 11201

U.S. Dept of Treasury PO Box 979101 Saint Louis, MO 63197-9000

Wells Fargo

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

| INOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) a spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnership which share one or more common general partners; (vi) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).] NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME. THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING: CASE STILL PENDING (Y/N): [If closed] Date of closing: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): CASE STILL PENDING (Y/N): [If closed] Date of closing: (CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) | |
|--|---|
| was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) asponses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partners; or (vii) partnership and one or more of its general partners; or (vii) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).] NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME. THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING: CASE NO: JUDGE: DISTRICT/DIVISION: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) | Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief: |
| THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING: 1. CASE NO.: JUDGE: DISTRICT/DIVISION: CASE STILL PENDING (Y/N): [If closed] Date of closing: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: CASE NO.: JUDGE: DISTRICT/DIVISION: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: 3. CASE NO.: JUDGE: DISTRICT/DIVISION: | [NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).] |
| I. CASE NO.: JUDGE: DISTRICT/DIVISION: CASE STILL PENDING (Y/N): [If closed] Date of closing: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: 2. CASE NO.: JUDGE: DISTRICT/DIVISION: CASE STILL PENDING (Y/N): [If closed] Date of closing: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: 3. CASE NO.: JUDGE: DISTRICT/DIVISION: DISTRICT/DIVISION: | NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME. |
| CASE STILL PENDING (Y/N): [If closed] Date of closing: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: 2. CASE NO.: JUDGE: DISTRICT/DIVISION: CASE STILL PENDING (Y/N): [If closed] Date of closing: CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: 3. CASE NO.: JUDGE: DISTRICT/DIVISION: | ☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING: |
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| SCHEDULE "A" OF RELATED CASE: 3. CASE NO.: JUDGE: DISTRICT/DIVISION: | MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): |
| | |
| CASE STILL PENDING (Y/N): [If closed] Date of closing: | 3. CASE NO.: JUDGE: DISTRICT/DIVISION: |
| | CASE STILL PENDING (Y/N): [If closed] Date of closing: |

DEBTOR(S): Joseph Dahari

| DISCLOSURE OF RELATED CASES (cont'd) | |
|---|---|
| CURRENT STATUS OF RELATED CASE: | |
| (1 | Discharged/awaiting discharge, confirmed, dismissed, etc.) |
| MANNER IN WHICH CASES ARE RELATED (Refer to | o NOTE above): |
| REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE: | "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN |
| | s who have had prior cases dismissed within the preceding 180 days may not red to file a statement in support of his/her eligibility to file. |
| TO BE COMPLETED BY DEBTOR/PETITIONER'S AT | TORNEY, AS APPLICABLE: |
| I am admitted to practice in the Eastern District of New Yo | ork (Y/N): Y |
| CERTIFICATION (to be signed by pro se debtor/petitione | er or debtor/petitioner's attorney, as applicable): |
| I certify under penalty of perjury that the within bankrupto as indicated elsewhere on this form. | ey case is not related to any case now pending or pending at any time, except |
| /s/ Jay Meyers | |
| Jay Meyers Signature of Debtor's Attorney Jay Meyers, Esq. 1688 Victory Boulevard Ste. 201 | Signature of Pro Se Debtor/Petitioner |
| Staten Island, NY 10314 718 273-2525 Fax:718 981-0433 | Signature of Pro Se Joint Debtor/Petitioner |
| | Mailing Address of Debtor/Petitioner |
| | City, State, Zip Code |
| Failure to fully and truthfully provide all information requ | Area Code and Telephone Number ired by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any |

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009